PROJECT 10073 RECORD

| 1. DATE - TIME GROUP | 2. LOCATION | |
|---|--|-----|
| 10 Jun 67 11/01002 | Enon, Ohio | Mul |
| 3. SOURCE Civilian 4. NUMBER OF OBJECTS | 10. CONCLUSION INSUFFICIENT DATA FOR EVALUATI | ON |
| 5. LENGTH OF OBSERVATION 10 seconds | 11. BRIEF SUMMARY AND ANALYSIS | |
| 6. TYPE OF OBSERVATION Ground Visual | SEE CASE FI | L E |
| 7. COURSE unknown | | |
| 8. PHOTOS D Yes XXX No | | |
| 9. PHYSICAL EVIDENCE 1 Yes XXNo | | |

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

Jasuff Stata

DEPARTMENT OF THE AIR FORCE HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC) WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433

REPLY TO

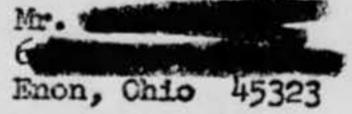
TDET/UFO

SUBJECT

UFO Observation, 10 June 1967

10 June 67 Escoro, Okio 1/000 3 JUN 1 3 1967

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Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

Deed O. Can Jame

JAMES C. MANATT, Colonel, USAF Director of Technology and Subsystems

1 Atch FTD Form 164 w/envelope

DET/und offinit y

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

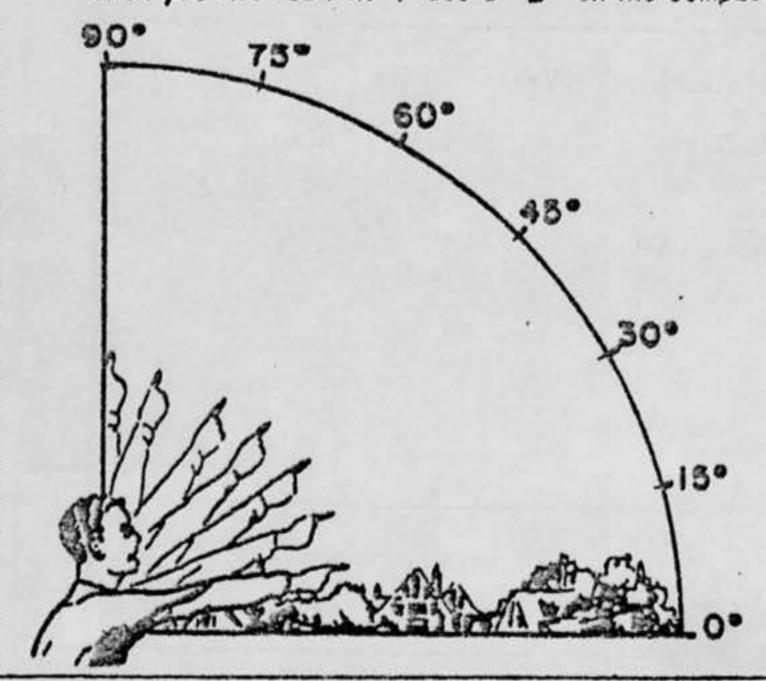
| 1. When did you see the object? Saturday Twe 1967 Day Month Year | 2. Time of day: Zooo Zo Hour Minutes (Circle One): A.M. or P.M. |
|--|---|
| 3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other | (Circle One); a. Daylight Saving b. Standard |
| 4. Where were you when you saw the object? ——————————————————————————————————— | Tachord Otho City or Town State or County |
| b. Fairly certain d. J. 5.1 How was time in sight determined? | Hours Minutes Seconds Not very sure Just a guess No |
| a Bright a. E | GHT Bright Cloudy |
| 5. In back of you e. C | he SUN located as you looked at the object? To your left Overhead Oon't remember |

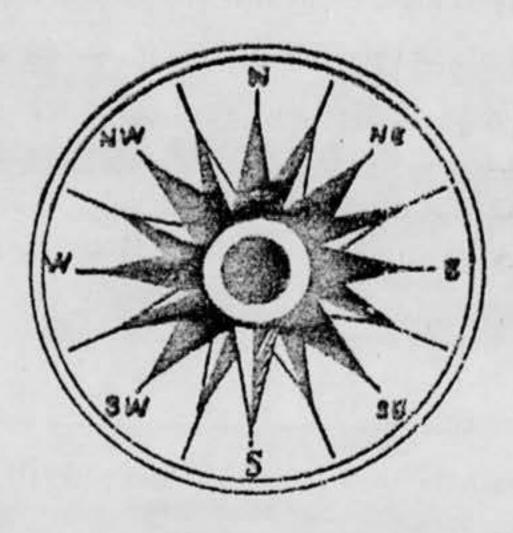
| 8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON? | | | | | | | |
|--|--|--|--|--|--|--|--|
| 8.1 STARS (Circle One): | 8.2 MOON (Circle One): | | | | | | |
| o. None | a. Bright moonlight | | | | | | |
| b. A few | b. Dull moonlight | | | | | | |
| d. Don't remember | c. No moonlight – pitch dark d. Don't remember | | | | | | |
| d. Don't ramember | G. DGI I TOMOMICON | | | | | | |
| 9. What were the weather conditions at the time you | saw the object? | | | | | | |
| CLOUDS (Circle One): | WEATHER (Circle One): | | | | | | |
| a. Clear sky | a. Dry | | | | | | |
| b. Hazy | o. Fog, mist, or light rain | | | | | | |
| , , | . Moderate or heavy rain | | | | | | |
| The second of th | I. Snow | | | | | | |
| | Don't remember | | | | | | |
| 10. The object appeared: (Circle One): | | | | | | | |
| a. Solid d. As a light | | | | | | | |
| b. Transparent e. Don't rememb | er | | | | | | |
| c. Vapor | | | | | | | |
| 11. If it appeared as a light, was it brighter than the brightest stars? (Circle One): a. Brighter b. Dimmer c. About the same d. Don't know 11.1 Compare brightness to some common object: | | | | | | | |
| 12. The edges of the object were: | | | | | | | |
| (Circle One); a. Fuzzy or blurred | o. Other LACOLARIA | | | | | | |
| b. Like a bright star | | | | | | | |
| c. Sharply outlined | | | | | | | |
| d. Don't remember | | | | | | | |
| 13. Did the object: | (Circle One for each question) | | | | | | |
| a. Appear to stand still at any time? | Yes No Don't know | | | | | | |
| b. Suddenly speed up and rush away at any tin | | | | | | | |
| c. Break up into parts or explode? d. Give off smoke? | Yes No Don't know Yes No Don't know | | | | | | |
| e. Change brightness? | Yes No Don't know Yes No Don't know | | | | | | |
| f. Change shape? | Yes No Don't know | | | | | | |
| g. Flash or flicker? | Yes Olo Don't know | | | | | | |
| b. Disappear and reappear? | Maria National Designation of the Control of the Co | | | | | | |
| | (Tas No Don 1 know | | | | | | |

| 14. | Did the object disappear while you were watching it? If so, how? Yes, Vanished | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| 15. | Did the object move behind something at any time, particularly a cloud? (Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind: | | | | | | | |
| 16. | Did the object move in front of symething at any time, particularly a cloud? (Circle One): Yes No Don't Know. IF you answered YES, then tell what in front of: | | | | | | | |
| 17. | Tell in a few words the following things about the object: a. Sound | | | | | | | |
| 18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head? | | | | | | | | |
| 19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving. | | | | | | | | |
| | | | | | | | | |

| 20. | Do y | you think you can | estimate the | speed of | the obje | ect? | | 31 | | |
|-----|---|---------------------|---------------|-------------|----------|------|----------------|--------------|-----------------------|------|
| | | (Circle One) | Yes | 6 | 10) | 740 | | | | |
| | 15 | | | | d way a | - 4: | | | | |
| | IF Y | ou answered YES | , men what s | pead woul | a you e | 3711 | rare? | | | |
| 21. | Doy | you think you can | estimate how | far away | from y | ou t | he object was? | | | |
| | | (Circle One) | Yes | 1 | 6 | | | | | |
| | 10 | | | - | ノ | | | | * | |
| | ir y | ou answered YES | , then how to | r away wo | uld you | 50 | y 11 was? | | | |
| 22. | | re were you locate | ed when you | saw the ob | ject? | | 23. Were you | (Circle One |) | |
| | (Circ | cle One): | | | | | a. in the | business s | section of a city? | |
| | a. 1 | nside a building | | | | 1 | 6. In the | residential | section of a city? | Cowo |
| | b. 1 | n a car | | | | | | n country si | | |
| | 60 | Outdoors | | | | | d. Near | an oirfield? | | |
| | d. 1 | n an airplane (typ | e) | | | | e. Flying | g over a cit | y? | |
| | e. / | at sea | | | | | f. Flying | over open | country? | |
| | 1. (|)ther | | | | | g. Other | | | |
| 24. | 24.1 What direction were you moving? (Circle One) a. North b. Northeast d. Southeast f. Southwest h. Northwest 24.2 How fast were you moving?miles per hour. 24.3 Did you stop at any time while you were looking at the object? (Circle One) Yes No | | | | | | | | | |
| 25. | Did | you observe the o | bject through | any of th | e follow | wing | ? | | | |
| | a, | Eyeglasses | Yes | No | | ٠. | Binoculars | Yes | No | |
| | | Sun glasses | Yes | No | | f. | Telescope | Yes | No / | |
| | c. | Windshield | Yes | No | | g. | Theodolite | Yes | No | |
| | d. | Window glass | Yes | No | | h. | Other | | | |
| 26. | | ct or objects which | h, when plac | ed up in ti | he sky, | wo | | me appeara | nce as the object whi | |

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.





28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

 10 Chexi

JUN

Month

10

Day

19 19 1 . . .

| 30. Have you ever seen this, or a similar object | before. If so give date or date | s and locat | lon. |
|--|---|-------------|--------------------------|
| 00 | | | |
| 31. Was anyone else with you at the time you sav | v the object? (Circle One) | Nos | No |
| 31.1 IF you answered YES, did they see the | object too? (Circle One) | Yes | No |
| 31.2 Please list their names and addresses: | Euch "" | 45 | -323 |
| 32. Please give the following information about y NAME Last Name | ourself: | | Middle Name |
| ADDRESS | City | Zone | State |
| TELEPHONE NUMBERS | AGE 13 SEX | , m | |
| | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| Indicate any additional information about you | | perience, w | hich might be pertinent. |
| Indicate any additional information about you | rself, including any special ex | | |
| Indicate any additional information about you | rself, including any special ex | | |
| Indicate any additional information about you | rself, including any special ex | | |
| Indicate any additional information about you | rself, including any special ex | | |
| Indicate any additional information about you | rself, including any special ex | | |

67

Year

FFD Duty Off.

| 34. | Date you completed this questionnaire: | | Month | Year |
|-----|---|-------------------------|-------|-----------------|
| 35. | Information which you feel pertinent and which is not questionnaire or a narrative explanation of your sight. The person report And some of this be vague / construct | rting. Ling Repor | 15 A | minox med to |